

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

10/1527383
APPLICANT
FILING DATE

CLAIMS

	AS FILED				AFTER 1st AMENDMENT				AFTER 2nd AMENDMENT					AS FILED				AFTER 1st AMENDMENT				
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	
1	/		/		/		/		/		/		51	/		/		/		/		
2		/		/		/		/		/		/	52	/		/		/		/		
3			/			/		/		/		/	53	/		/		/		/		
4				/			/			/		/	54	/		/		/		/		
5					/			/			/		55	/		/		/		/		
6						/				/		/	56	/		/		/		/		
7							/				/		57	/		/		/		/		
8								/				/	58	/		/		/		/		
9									/			/	59	/		/		/		/		
10										/		/	60	/		/		/		/		
11											/		61	/		/		/		/		
12												/	62	/		/		/		/		
13													63	/		/		/		/		
14													64	/		/		/		/		
15													65	/		/		/		/		
16													66	/		/		/		/		
17													67	/		/		/		/		
18													68	/		/		/		/		
19													69	/		/		/		/		
20													70	/		/		/		/		
21													71	/		/		/		/		
22													72	/		/		/		/		
23													73	/		/		/		/		
24													74	/		/		/		/		
25													75	/		/		/		/		
26													76	/		/		/		/		
27													77	/		/		/		/		
28													78	/		/		/		/		
29													79	/		/		/		/		
30													80	/		/		/		/		
31													81	/		/		/		/		
32													82	/		/		/		/		
33													83	/		/		/		/		
34													84	/		/		/		/		
35													85	/		/		/		/		
36													86	/		/		/		/		
37													87	/		/		/		/		
38													88	/		/		/		/		
39													89	/		/		/		/		
40													90	/		/		/		/		
41													91	/		/		/		/		
42													92	/		/		/		/		
43													93	/		/		/		/		
44													94	/		/		/		/		
45													95	/		/		/		/		
46													96	/		/		/		/		
47													97	/		/		/		/		
48													98	/		/		/		/		
49													99									
50													100									
TOTAL IND.	16	↓		↓		↓		↓					TOTAL IND.		↓		↓		↓			
TOTAL DEP.	82	←		←		←		←					TOTAL DEP.		←		←		←			
TOTAL CLAIMS	98												TOTAL CLAIMS									